| Fill in this inforn | nation to identify yo | our case: | | | | | |
|---|---|-----------------------------|---|--|----------------------|-------------------|---|
| Debtor 1 | Cynthia N. R | amos | | Check if this is: | | | |
| Debtor 2 | | | | | | An amended filing | ving postpetition chapter |
| (Spouse, if filing) | | | | | | 13 expenses as of | |
| United States Bar | kruptcy Court for the | : EASTER | N DISTRICT OF PENNS | SYLVANIA | _ | MM / DD / YYYY | |
| Case number | 17-15096- AMC | | | | | | |
| Official F | orm 106J | | | | 1 | | |
| Schedul | e J: Your | Expens | ses AMENDE | D | | | 12 <i>/</i> * |
| information. If number (if known part 1: Des 1. Is this a join part 1: Des 1. | more space is ne wn). Answer ever cribe Your House int case? | eded, attac ry question. | f two married people al h another sheet to this | | | | |
| <u> </u> | to line 2. Des Debtor 2 live No Yes. Debtor 2 mu | • | te household? | s for Separate House | <i>ehold</i> of Debt | tor 2. | |
| 2. Do you ha | ve dependents? | □No | | | | | |
| Do not list Debtor 2. | Debtor 1 and | ✓ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| Do not sta dependent | | | | | Daughter | | □ No ✓ Yes |
| | | | | Son | | 9 | ☐ No ✔ Yes |
| | | | | | | | No |
| | | | | | | | Yes |
| | | | | | | | ∐ No □ Yes |
| expenses | xpenses include of people other t nd your depende | han 🛅 🔻 | No Yes | | | | 163 |
| Estimate your | f a date after the | our bankrup | otcy filing date unless y | | | | apter 13 case to report f the form and fill in the |
| | ch assistance an | | overnment assistance i uded it on <i>Schedule I:</i> Y | | | Your expe | enses |
| | or home owners and any rent for th | | es for your residence. I lot. | nclude first mortgag | e 4. \$ | | 696.00 |
| If not incl | uded in line 4: | | | | | | |
| 4a. Rea | l estate taxes | | | | 4a. \$ | | 0.00 |
| | perty, homeowner's | s, or renter's | insurance | | 4a. \$ | | 0.00 |
| | ne maintenance, re | | | | 4c. \$ | | 20.00 |
| | neowner's associa | | | | 4d. \$ | | 0.00 |
| 5. Additiona | l mortgage payme | ents for you | ır residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| Debtor 1 | Cynthia N. Ramos | Case num | ber (if known) | 17-15096- AMC |
|-------------------------|--|----------|----------------|-------------------------------|
| 0 1141114 | • | | | |
| 6. Utilit 6a. | :ies: Electricity, heat, natural gas | 6a. | \$ | 200.00 |
| 6b. | Water, sewer, garbage collection | 6b. | | 60.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 100.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| | d and housekeeping supplies | — 7. | | 515.00 |
| | dcare and children's education costs | 8. | | 0.00 |
| | hing, laundry, and dry cleaning | 9. | \$ | 200.00 |
| | onal care products and services | 10. | · | 150.00 |
| | ical and dental expenses | 11. | · . | 25.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | · | |
| | ot include car payments. | 12. | \$ | 75.00 |
| | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 100.00 |
| 4. Char | ritable contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insu | rance. | | | |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | · | 0.00 |
| | Health insurance | 15b. | * | 0.00 |
| | Vehicle insurance | 15c. | | 0.00 |
| | Other insurance. Specify: | 15d. | \$ | 0.00 |
| Spec | · | 16. | \$ | 0.00 |
| | allment or lease payments: | | _ | |
| | Car payments for Vehicle 1 | 17a. | · | 0.00 |
| | Car payments for Vehicle 2 | 17b. | | 0.00 |
| | Other. Specify: | 17c. | | 0.00 |
| | Other. Specify: | 17d. | \$ | 0.00 |
| dedu | r payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spec | | 19. | _ | |
| | er real property expenses not included in lines 4 or 5 of this form or on Scho | | | 0.00 |
| | Mortgages on other property | 20a. | · | 0.00 |
| | Real estate taxes | 20b. | | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | Homeowner's association or condominium dues | 20e. | · | 0.00 |
| 1. Othe | Per Expenses Pet Expenses | 21. | +\$ | 20.00 |
| 2. Calc | ulate your monthly expenses | | | |
| 22a. | Add lines 4 through 21. | | \$ | 2,161.00 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | , |
| | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,161.00 |
| | | | · — | |
| | ulate your monthly net income. | | • | 0.000.47 |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 2,636.17 |
| | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,161.00 |
| 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | 475.17 |
| For exmodif | ou expect an increase or decrease in your expenses within the year after you can be you expect to finish paying for your car loan within the year or do you expect you incation to the terms of your mortgage? | | | ease or decrease because of a |